

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : 09/743,827

Examiner : Lambkin

GAU : 1626

From: MAS

Location: (IDC) FMF FDC

Date: 5/9/05

Tracking #: 06086371

Week Date: 3/14/05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input checked="" type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input checked="" type="checkbox"/> OATH	<u>7/31/01</u>	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: ① Signature for William wai-Lun Lam is missing from declaration.

② Foreign priority is listed on declaration and certified copy is present, but not listed on bib and no acknowledgment is made on 37/326 please resolve

Thanks

[XRUSH] RESPONSE:

① See Petition Granted 9/20/02 non signing inventor
② corrected

INITIALS: [Signature]

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04



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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/743,827	07/31/2001	Richard K. Haynes	LEA 33 820	8606
35969	7590	05/16/2005		
JEFFREY M. GREENMAN BAYER PHARMACEUTICALS CORPORATION 400 MORGAN LANE WEST HAVEN, CT 06516			EXAMINER LAMBKIN, DEBORAH C	
			ART UNIT 1626	PAPER NUMBER

DATE MAILED: 05/16/2005

PRIORITY ACKNOWLEDGMENT

- ☒ 1. Receipt is acknowledged of priority papers submitted under 35 U.S.C. 119. The papers have been placed of record in the file.
- ☐ 2. Applicant's claim for priority, based on papers filed in parent Application Number _____ submitted under 35 U.S.C. 119, is acknowledged.
- ☐ 3. The priority papers, submitted _____, after payment of the issue fee are
- ☐ acknowledged
While the priority claim or certified copy filed will be placed in the file record, neither will be reviewed and the patent when published will not include the priority claim.
See 37 CFR 1.55(a)(2).
 - ☐ not acknowledged since the processing fee in 37 CFR 1.17(i) has not been received.
- ☐ 4. For utility and plant applications filed on or after November 29, 2000, the priority claim is not entered because the claim was not presented within the time limit required by 37 CFR 1.55(a)(1). A petition to accept a delayed claim for priority under 35 U.S.C. 119(a) - (d) or (f), or 365(a) may be filed. See 37 CFR 1.55(c) and MPEP 201.14(a).

for [Signature]
Manager, Publishing Division
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Bib Data Sheet

CONFIRMATION NO. 8606

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/743,827	07/31/2001 RULE	514	1626	LEA 33 820
APPLICANTS Richard K. Haynes, Kowloon, HONG KONG; William Wai-Lun Lam, Kowloon, HONG KONG; Ho-Wai Chan, Territories, HONG KONG; Hing-Wo Tsang, New Territories, HONG KONG; Man-Ki Cheung, Kowloon, HONG KONG; Gisela Greif, Remagen-Rolandswerth, GERMANY; Gabriele Schmuck, Wuppertal, GERMANY; Arnd Voerste, Koln, GERMANY;				
** CONTINUING DATA ***** This application is a 371 of PCT/GB99/02267 07/14/1999				
** FOREIGN APPLICATIONS ***** EUROPEAN PATENT OFFICE (EPO) 98305596.3 07/14/1998				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance		STATE OR COUNTRY HONG KONG	SHEETS DRAWING	TOTAL CLAIMS 27
Verified and Acknowledged		Examiner's Signature	Initials	INDEPENDENT CLAIMS 11
ADDRESS 35969				
TITLE ANTIPARASITIC ARTEMISININ DERIVATIVES (ENDOPEROXIDES)				
FILING FEE RECEIVED 1756	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	